DLN: 93493311013679 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable VOTER REGISTRATION PROJECT □ Address change 26-4802468 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1725 DESALES STREET NW NO 650 ☐ Amended return ☐ Application pending (202) 568-3822 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 20036 G Gross receipts \$ 24,092,522 Name and address of principal officer H(a) Is this a group return for BETSY LIN ☐Yes **☑**No subordinates? 1725 DESALES STREET NW NO 650 H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No ıncluded? Tax-exempt status **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 2009 M State of legal domicile DC Summary 1 Briefly describe the organization's mission or most significant activities TO HELP ORGANIZATIONS PLAN, MANAGE, AND EVALUATE NONPARTISAN VOTER REGISTRATION PROGRAMS Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year** Current Year 8 Contributions and grants (Part VIII, line 1h) . 8,838,017 24,092,522 Ravenua 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 8,838,017 24,092,522 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 3,639,527 27,337,443 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 572,979 665,883 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶173,896 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 981,597 1,460,546 5,194,103 29,463,872 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 3,643,914 -5,371,350 Net Assets or Fund Balances Beginning of Current Year End of Year 8,240,169 3,046,126 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 208,474 31,167 22 Net assets or fund balances Subtract line 21 from line 20 . 8,209,002 2,837,652 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-17 Signature of officer Sign Here BETSY LIN CAMPAIGN DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-10-17 P00633304 Paid self-employed Firm's name ► HAN GROUP LLC Firm's EIN ▶ Preparer Use Only Firm's address ▶ 1020 19TH STREET NW SUITE 800 Phone no (202) 293-7000 WASHINGTON, DC 20036 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Sta	tement of Program Ser	vice Accomplish	ments		
	 Che	ck if Schedule O contains a re	sponse or note to an	y line in this Part III .		🗹
1		cribe the organization's missio		,		
AND	PARTICIPATI		SISTRATION PROJECT	T PROVIDES TECHNIC	PLE OF COLOR THAT ARE ELIGIBLE AL ASSISTANCE TO NONPARTISAN ER REGISTRATION DRIVES	
2	the prior Fo	nanization undertake any signi orm 990 or 990-EZ? escribe these new services on			ich were not listed on	☐ Yes ☑ No
3		anization cease conducting, o		anges in how it condu	cts any program	
,	services?	escribe these changes on Sche			· · · · · · · · ·	☐ Yes ☑ No
4	Section 50:		ations are required to	o report the amount of	argest program services, as measu f grants and allocations to others, tl	
4a	(Code See Addition) (Expenses \$ al Data	28,180,505	including grants of \$	27,337,443) (Revenue \$	0)
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other prog (Expenses	ram services (Describe in Sch	edule O) ncluding grants of \$) (Revenue \$)
4e	Total prog	Jram service expenses ►	28,180,505	5		

Form 990 (2018) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 No Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 No Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🕏 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 💆 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? No 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11h assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Yes 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Nο Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? **12**b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(u)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 14a Nο **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments 14h No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Nο Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο **20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

No

37

38

Part V

Nο

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Form **990** (2018)

No

37

38

Yes

Pai	tiV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R. Part V. line 2	36		No

Check if Schedule O contains a response or note to any line in this Part V					
the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1			1

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Statements Regarding Other IRS Filings and Tax Compliance

			Yes
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	10	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N No Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Form **990** (2018)

orm	990 (2018)			Page 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lınes 🗹
Se	ction A. Governing Body and Management			
_			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 1a 4			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►TATE & TRYON 2021 L STREET NW SUITE 400 WASHINGTON, DC 20036 (202) 293-2200			

Part VII

(F)

_	010)
	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,
	and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- vear List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
 - List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	Average hours per week (list any hours for related organizations below dotted line)		ne bo	ox, ι n of	t che unle: ficer	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) ILONA PRUCHA PRESIDENT	1 00	Х		х				0	0	0
(2) JOHN YANG TREASURER	1 00	Х		х				0	0	0
(3) BILL VANDENBERG SECRETARY	1 00	х		х				0	0	0
(4) ASHLEY SPILLANE BOARD MEMBER	1 00	X						0	0	0
(5) BETSY LIN CAMPAIGN DIRECTOR	30 00			x				89,522	0	13,861
				l			l			Farm 000 (3010)

			_		

1b Sub-Total		 •	<u> </u>		

1b Sub-Total				•			
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines thead to)					80 522	۵	13.961

	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	▶	89,522	0	13,861
2	Total number of individuals (including but not limited to those listed above) of reportable compensation from the organization ▶ 0) wh	o received more than	\$100,000	

				Vac	No			
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0								
d	Total (add lines 1b and 1c)	89,522	0		13,861			
С	Total from continuation sheets to Part VII, Section A	>						

d	Total (add lines 1b and 1c) ▶ 89,522	0		13,861
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \blacktriangleright 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0				
			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the				

	or reportable compensation from the organization P 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No.

	or reportable compensation from the organization > 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No

4	No
5	No

(C)

CONSULTING

SUPPORT

SANDBOX SUBSCRIPTION/LICENSE

GENERAL RESEACH SERVICES AND

412,473

190,000

168,970

162,500

Form 990 (2018)

Section B. Independent Contractors 1

1140 CONNECTICUT AVENUE NORTHWEST

1090 VERMONT AVENUE NORTHWEST SUIT

compensation from the organization ▶ 4

1626 POTOMAC AVENUE SOUTHEAST

WASHINGTON, DC 20036

WASHINGTON, DC 20005 BEEHIVE RESEARCH INC,

WASHINGTON, DC 20003

CATALIST LLC.

5

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Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation
from the organization Report compensation for the calendar year ending with or within the organization's tax year
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services rendered to the organization of "Yes," complete Schedule J for such person . . .

(A)	(B)	(C)
Name and business address	Description of services	Compensation
GRASSROOTS SOLUTIONS, 861 EAST HENNEPIN AVENUE SUITE 350 MINNEAPOLIS, MN 55414	CONSULTING SERVICES	412,473

Name and business address	Description of services	
RASSROOTS SOLUTIONS,	CONSULTING SERVICES	
61 EAST HENNEPIN AVENUE SUITE 350		ı
IINNEAPOLIS, MN 55414		1

	CONSULTING SERVICES	
861 EAST HENNEPIN AVENUE SUITE 350 MINNEAPOLIS, MN 55414		
BLUE ENGINE MESSAGE MEDIA,	STRATEGIC COMMUNICATIONS	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

Part	VIII Statement of Revenue					rage 3
	Check if Schedule O contains a response or n	ote to any line in				🗆
		Tota	(A) Il revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(A	1a Federated campaigns 1a	l	L	revenue		312 - 314
Gifts, Grants illar Amounts	b Membership dues 1b					
6ra mot	c Fundraising events 1c					
Ę,Ę	d Related organizations 1d					
ĭë ëi	e Government grants (contributions)					
ıns, Sin	f All other contributions, gifts, grants,					
tributions, Gifts, Grants Other Similar Amounts	and similar amounts not included above	4,092,522				
흕호	g Noncash contributions included in lines 1a - 1f \$					
Contributions, and Other Sim	In lines 1a - 1f \$ h Total. Add lines 1a-1f	>				
		Business Code	24,092,522			Τ
nue	2a					
Reve	h					
Ce l	b					
χerν	d ————					
ue;	e ———					
Program Service Revenue	f All other program service revenue		1	I		
<u>~</u>	9 Total. Add lines 2a−2f ▶					
	3 Investment income (including dividends, interest, similar amounts)	and other				
	4 Income from investment of tax-exempt bond proce					
	5 Royalties	>				
	17	ersonal				
	6a Gross rents					
	b Less rental expenses					
	c Rental income or					
	(loss)					
	d Net rental income or (loss)	Other				
	7a Gross amount	Other				
	from sales of assets other					
	than inventory					
	b Less cost or other basis and					
	sales expenses C Gain or (loss)					
	d Net gain or (loss)	▶				
	8a Gross income from fundraising events (not including \$ of					
nue	contributions reported on line 1c)					
eve	See Part IV, line 18 a					
r R	b Less direct expenses b c Net income or (loss) from fundraising events .	. •				
Other Revenue	9a Gross income from gaming activities					
0	See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities					
	10aGross sales of inventory, less returns and allowances					
	a					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory .					
	Miscellaneous Revenue Busine	ess Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	•				
	12 Total revenue. See Instructions		24.002.522	,		_
		· [24,092,522	<u>'</u>) C	Form 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must comp	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			\square
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	27,337,443	27,337,443	, , , , , , , , , , , , , , , , , , ,	
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	103,383	31,015	41,353	31,015
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	470,933	392,032	54,041	24,860
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	31,471	31,198	273	
10 Payroll taxes	60,096	46,495	8,688	4,913
11 Fees for services (non-employees)				
a Management				
b Legal	45,845		45,845	
	85,399		85,399	
c Accounting	03,377		03,333	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,011,083	132,256	772,961	105,866
12 Advertising and promotion				
13 Office expenses	12,992	7,364	5,628	
14 Information technology				
15 Royalties				
16 Occupancy	58,210		58,210	
17 Travel	225,975	202,018	20,225	3,732
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
expenses on Schedule O)				
a BUSINESS EXPENSES	9,980		6,470	3,510
b TELECOMMUNICATIONS	8,606	165	8,441	
c UTILITIES EXPENSES	1,568	34	1,534	
d				
e All other expenses	888	485	403	
Total functional expenses. Add lines 1 through 24e	29,463,872	28,180,505	1,109,471	173,896
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Form **990** (2018)

Form 990 (2018)

19

20

21

34

Deferred revenue

Total liabilities and net assets/fund balances

Tax-exempt bond liabilities

Escrow or custodial account liability Complete Part IV of Schedule D

		check if schedule o contains a response of note to any line in this Part IX.			🗀
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	4,081,505	1	312,437
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	3,561,392	3	1,975,914
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ssets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	21,556	9	7,245
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D. 10a			

Ass	8	Inventories for sale or use			8	
4	9	Prepaid expenses and deferred charges		21,556	9	7,245
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10 c	
	11 Investments—publicly traded securities .			11		
	12	Investments—other securities See Part IV, line	11		12	
	13	Investments—program-related See Part IV, line	11		13	
	14 Intangible assets			14		
	15	Other assets See Part IV, line 11		575,716	15	750,530
	16	Total assets.Add lines 1 through 15 (must equ	al line 34)	8,240,169	16	3,046,126

l	busis complete ruit vi or senedule b				
ь	Less accumulated depreciation	10b		10 c	
11	Investments—publicly traded securities .			11	
12	Investments—other securities See Part IV, line		12		
13	Investments—program-related See Part IV, line		13		
14	Intangible assets		14		
15	Other assets See Part IV, line 11		575,716	15	750,530
16	Total assets.Add lines 1 through 15 (must equa	al line 34)	8,240,169	16	3,046,126
17	Accounts payable and accrued expenses		31,167	17	208,474
18	Grants payable			18	

19 20

21

8,240,169

34

3,046,126 Form **990** (2018)

	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
age E		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	31.167	26	208.474

<u>. cc</u>		persons complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	31,167	26	208,474
Balances	27	Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	4,647,610	27	861,738
Bal	28	Temporarily restricted net assets	3,561,392	28	1,975,914
) pun	29	Permanently restricted net assets		29	
Fur		Organizations that do not follow SFAS 117 (ASC 958),			
10	30	check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	8,209,002	33	2,837,652
Z	34	Total liabilities and net assets/fund balances	8 240 169	2/1	3.046.126

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

3b

No

Form 990 (2018)

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 26-4802468

Name: VOTER REGISTRATION PROJECT

Form 990 (2018)

Form 990, Part III, Line 4a: VOTER REGISTRATION PROJECT'S PURPOSE IS TO ASSIST U.S. CITIZENS WHO ARE PEOPLE OF COLOR THAT ARE ELIGIBLE TO REGISTER TO VOTE AND PARTICIPATE IN DEMOCRACY VOTER REGISTRATION PROJECT PROVIDES TECHNICAL ASSISTANCE TO NONPARTISAN VOTER REGISTRATION DRIVES AND PARTNERS WITH OTHER ORGANIZATIONS TO CONDUCT NONPARTISAN VOTER REGISTRATION DRIVES

efil	e GR	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9	3493311013679
	m 99	OULE A	Com		Charity Staturganization is a sect 4947(a)(1) nonexe		2018		
		f the Treasury		► Go to	www.irs.gov/Form				Open to Public Inspection
Nam	e of tl	nie Service he organiza STRATION PRO	tion					Employer identific	
								26-4802468	
	rt I				us (All organization e it is (For lines 1 thro			See instructions.	
1	/ gam_		•		ssociation of churches	•		(A)(i).	
2		,		,	1)(A)(ii). (Attach Sch			()(-)	
3					vice organization desc	,	,,	iii).	
4		·	esearch organ	·	ed in conjunction with			•	inter the hospital's
5		An organiza			t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	bed in section 170
6				•	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
7	✓			mally receives vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	nit or from the gener	al public described in
8		A communi	ty trust descr	ıbed ın sectio ı	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				lege or university or a
LO		from activit	ies related to וncome and נ	ıts exempt fur ınrelated busır	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
1					d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
.2		more public	ly supported	organizations (d exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting org n(s) the powe	janization oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	nt of the supp		pervised or controlled in ation vested in the sare and C.				
С					supporting organizatio				ated with, its
d		Type III n	on-function	ally integrate he organizatio	ions) You must com d. A supporting organ n generally must satis rt IV, Sections A and	Ization operated fy a distribution	ın connection wi requirement and	th its supported orga	
e		Check this	box if the org	anızatıon recei	ved a written determir integrated supporting	nation from the I		pe I, Type II, Type II	I functionally
f	Enter			organizations	3 1, 333	-		_	
g					upported organization(I
	(1) [(i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions)) (iv) Is the organization in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
						Yes	No		
ota	<u> </u>								
		work Reduc	tion Act Noti	ce, see the I	nstructions for	Cat No 11285	SF !	Schedule A (Form 9	90 or 990-EZ) 2018

Page 2

	III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
•	Section A. Public Support										
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
	(or fiscal year beginning in) ▶		` '	• • •							
L	Gifts, grants, contributions, and	631,000	1 652 202	15 107 663	0 020 017	24.002.522	E0 411 E02				
	membership fees received (Do not	631,000	1,652,302	15,197,662	8,838,017	24,092,522	50,411,503				
	include any "unusual grant ") Tax revenues levied for the										
2	organization's benefit and either paid										
	to or expended on its behalf										
,	The value of services or facilities										
•	furnished by a governmental unit to										
	the organization without charge										
1	Total. Add lines 1 through 3	631,000	1,652,302	15,197,662	8,838,017	24,092,522	50,411,503				
-	The portion of total contributions by	331,333	2,002,002	10,137,002	0,000,027	21,052,522	50,111,505				
,	each person (other than a										
	governmental unit or publicly										
	supported organization) included on						8,193,013				
	line 1 that exceeds 2% of the						-,,				
	amount shown on line 11, column (f)										
5	Public support. Subtract line 5						42.240.400				
	from line 4						42,218,490				
•	Section B. Total Support						_				
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total				
	(or fiscal year beginning in) ▶	(a)2014	(0)2013	(6)2016	(u)2017	(6)2010	(1)TOLAT				
7	Amounts from line 4	631,000	1,652,302	15,197,662	8,838,017	24,092,522	50,411,503				
8	Gross income from interest,										

5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						8,193,01
6	Public support. Subtract line 5 from line 4						42,218,49
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e)2018	(f)Total
7	Amounts from line 4	631,000	1,652,302	15,197,662	8,838,017	24,092,522	50,411,50
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						50,411,50
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	or the organization	n's first, second, th	nird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶[

	income from similar sources								
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income Do not include gain								
	or loss from the sale of capital assets (Explain in Part VI)								
11	Total support. Add lines 7 through 10							50,41	L1,503
12	Gross receipts from related activities,	etc (see instructi	ons)			12			
13	First five years. If the Form 990 is fo	or the organization	n's first, second, t	hird, fourth, or fif	th tax year as a secti	on 501	(c)(3) ord	anization,	
	check this box and stop here	-			•		· / · / -		
	ection C. Computation of Public								
	=								
14	Public support percentage for 2018 (In	ne 6, column (f) c	livided by line 11,	column (f))		14		83 7	'50 %
15	Public support percentage for 2017 Sc	hedule A, Part II,	line 14			15		70 3	10 %
16a	33 1/3% support test—2018. If the	organization did	not check the box	on line 13, and l	ine 14 is 33 1/3% or	more, c	heck this	box	
	and stop here. The organization qual	ifies as a publicly	supported organiz	zation				▶ ☑	
ь	33 1/3% support test-2017. If th				, and line 15 is 33 1/3	3% or m	ore, che	ck this	
	box and stop here. The organization	i dualifies as a nui	hlicly supported o	rganization				▶□	
172	10%-facts-and-circumstances test				ine 13 16a or 16b	and line	14		
1/4	is 10% or more, and if the organization								
	in Part VI how the organization meets	the "facts-and-cii	cumstances" test	The organization	n qualifies as a public	ly supp	orted		
	organization							▶□]
h	10%-facts-and-circumstances tes	st—2017. If the o	rganization did n	ot check a box on	line 13, 16a, 16b, or	. 17a. a	nd line		-
"	15 is 10% or more, and if the organiz								
	Explain in Part VI how the organization	on meets the "fact	:s-and-circumstan	ces" test. The ord	anization qualifies as	a publ	ıcly		

P	Part III Support Schedule for Organizations Described in Section 509(a)(2)								
	(Complete only if you c						ler Part II. If		
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	below, please co	omplete Part II.)			
30	Calendar year		43.50.5		412.004		(0) =		
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received (Do not include any "unusual grants")								
2	Gross receipts from admissions,								
_	merchandise sold or services								
	performed, or facilities furnished in								
	any activity that is related to the								
_	organization's tax-exempt purpose Gross receipts from activities that are								
3	not an unrelated trade or business								
	under section 513								
4	Tax revenues levied for the								
	organization's benefit and either paid								
_	to or expended on its behalf The value of services or facilities								
5	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5								
7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified								
	persons that exceed the greater of								
	\$5,000 or 1% of the amount on line								
	13 for the year								
	Add lines 7a and 7b								
8	Public support. (Subtract line 7c								
S	from line 6) ection B. Total Support								
	Calendar year			I	T				
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
9									
10a	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties and income from similar sources								
h	Unrelated business taxable income								
_	(less section 511 taxes) from								
	businesses acquired after June 30,								
	1975								
C	Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b,								
	whether or not the business is								
	regularly carried on								
12									
	loss from the sale of capital assets								
13	(Explain in Part VI) Total support. (Add lines 9, 10c,								
	11, and 12)								
14	First five years. If the Form 990 is fo	r the organization	's fırst, second, tl	nird, fourth, or fift	:h tax year as a se	ction 501(c)(3) c	rganızatıon,		
	check this box and stop here						▶ 🗆		
Se	ection C. Computation of Public								
15	Public support percentage for 2018 (lin	ie 8, column (f) di	ivided by line 13,	column (f))		15			
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16			
Se	ection D. Computation of Invest								
17	Investment income percentage for 201	1 8 (line 10c, colur	mn (f) divided by	line 13, column (f	())	17			
18	Investment income percentage from 2	017 Schedule A, ¹	Part III, line 17			18			
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not		
	more than 33 1/3%, check this box and s						▶ □		
	33 1/3% support tests—2017. If the								
	not more than 33 1/3%, check this box	-			•		▶ □		
20	Private foundation. If the organization		-				▶□		
		AL GIG HOL CHECK O	. 202 011 11116 14, 1	a, or industrial	Callo DOX allu 366				

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		_	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Additional Data

Software ID: Software Version:

EIN: 26-4802468

Name: VOTER REGISTRATION PROJECT

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Instructions)

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

DLN: 93493311013679 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

2

5

8

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **Employer identification number** VOTER REGISTRATION PROJECT 26-4802468 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Par	t IIII	Organizations Maintai	ning Coll	ections o	f Art, H	listori	ical T	eas	ures, or	Other	Simila	r Assets ((continued)	
3		the organization's acquisition (check all that apply)	n, accession	, and other	records,	check	any of	the fo	ollowing t	hat are a	a significa	ınt use of ıt	s collection	
а		Public exhibition				d		Loar	or excha	ange pro	grams			
b		Scholarly research				e		Othe	er					
С		Preservation for future gener	ations											
4	Provi Part :	de a description of the organiz XIII	zation's coll	ections and	explain l	how the	ey furtl	ner th	ie organiz	ation's e	xempt pı	irpose in		
5		ng the year, did the organizations to be sold to raise funds rath									nılar	□ Y	es 🔲 I	No
Pa	rt IV	Escrow and Custodial			U F	000	David	T) /					Fa 000	Davt
		Complete if the organiza X, line 21.	ition answ	ered Yes	on For	m 990	, Part	10, 1	ine 9, or	report	ed an ar	nount on	Form 990	, Part
1a		e organization an agent, truste ded on Form 990, Part X?	ee, custodia	ın or other ı	intermed	ary for	contri	outioi	ns or othe	er assets	not	☐ Y	es 🗌	No
b	If "Ye	es," explain the arrangement i	n Part XIII	and comple	ete the fo	llowing	table		[Amount		_
c	Begir	nning balance								1c				_
d	Addıt	ons during the year								1 d				
е	Distri	butions during the year								1e				
f	Endır	ng balance								1 f				
2a	Did tl	he organization include an am	ount on Foi	m 990, Par	t X, line i	21, for	escrow	or c	ustodial a	ccount li	ability? .	🗆 Y	es 🗆 i	No
b		es," explain the arrangement i										_		
Pa	rt V	Endowment Funds. Co												
				(a)Curren	t year	(b) P	rıor yea	r	(c)Two ye	ears back	(d)Three	e years back	(e)Four ye	ars back
1 a	Beginn	ning of year balance												
b	Contrib	outions												
C	Net in	vestment earnings, gains, and	losses											
d	Grants	or scholarships												
е		expenditures for facilities												
		ograms						_			+			
		istrative expenses	•					-			+			
_		year balance	• •											
2		de the estimated percentage of		nt year end	balance	(line 1	g, colu	mn (a	a)) held a	S				
a		d designated or quasi-endowm	ient 🕨											
b		anent endowment ►												
С		porarily restricted endowment		d 1400	201									
За		percentages on lines 2a, 2b, ai here endowment funds not in				on that	t are h	eld ar	nd admini	stered fo	or the			
Ja		nization by	the posses.	sion or the t	Jigamzac	ion tha	c are n	ciu ai	ia adiiiiii	stered it	or tire		Yes	No
	(i) u	nrelated organizations										3	a(i)	
		elated organizations										3	a(ii)	<u> </u>
b		es" on 3a(II), are the related o	_		•			٠.					3b	
4	_	ribe in Part XIII the intended i			n's endov	vment i	runas							
Pa	rt VI	Land, Buildings, and E Complete if the organiza			" on For	m 990). Part	TV. I	ıne 11a.	See Fo	rm 990.	Part X. lı	ne 10.	
	Descr) Cost or oth (Investme	er basıs	(b) Cost						depreciation		(d) Book val	ue
1a	Land													
		ngs												
		nold improvements												
		nent												
	011													
		lines 1a through 1e (Column ((d) must ed	ual Form 9:	90, Part 2	X, colur	mn (B)	. line	10(c)).		>			0
	-				•				. , , .			- 		

Part VII Investments—Other Securities. Complete if the orga	nızatıon answ	ered "Yes" on Form	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value		chod of valuation -of-year market value
(1) Financial derivatives	:		
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 99	90, Part IV, lın	e 11c. See Form 99	0, Part X, line 13.
(a) Description of investment	b) Book value		thod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	- F 000 P	TV be 414 C - F	000 Pert V June 15
Part IX Other Assets. Complete if the organization answered 'Yes' o (a) Description	n Form 990, Par	t IV, line IIa See Forr	(b) Book value
(1) DUE FROM RELATED PARTIES (2) DEPOSITS			736,418 14,112
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answere		m 990, Part IV, line	750,530 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Bo	ok value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		
2. Liability for uncertain tax positions In Part XIII, provide the text of the foo	otnote to the org		atements that reports the

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Page 4

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Part XI

Add lines **4a** and **4b** 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 5 24,092,522 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 29,463,872

2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a 2b 2c c

2d Other (Describe in Part XIII) Add lines 2a through 2d . . 2e 3 29,463,872 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b

Add lines **4a** and **4b** 4c 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 29.463.872

Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference Explanation

See Additional Data Table

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 26-4802468

Name: VOTER REGISTRATION PROJECT

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION FOLLOWS THE AUTHORITATIVE GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES INCLUDED IN ACCOUNTING STANDARDS CODIFICATION TOPIC 740-10, INCOME TAXES THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE L IKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITION S FOR THE YEAR ENDED DECEMBER 31, 2018, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOU LD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAXEXEMPT STATUS AT DECEMBER 31, 2018, THE STATUTE OF LIMITATIONS FOR TAX YEARS ENDED DECEMBER 31, 2016 AND 2017 REMAINS OPEN WITH THE US FEDERAL JURISDICTION OR THE VARIOUS STATES AND LOCAL JURISDICTIONS IN WHICH THE ORGANIZATION FILES TAX RETURNS IT IS THE ORGANIZATION'S POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IF ANY. IN INCOME TAX EXPENSES

DLN: 93493311013679 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number VOTER REGISTRATION PROJECT 26-4802468 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

(2) (3)

(4) (5)

Schedule I (Form 990) 2018

Page **2**

(6) (7) Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV

Explanation Return Reference

PART I, LINE 2

THE CAMPAIGN DIRECTOR WILL ENTER INTO "JOINT EFFORT AGREEMENTS" WITH ORGANIZATIONS TO RUN PROGRAMS (MAIL, FIELD, AND BLENDED ACTIVITIES) IN THE TARGET STATES INCLUDED IN THESE AGREEMENTS WILL BE CLEAR METRICS, STANDARDS, AND QUALITY CONTROL AND ACCOUNTABILITY MEASURES BEYOND WHAT CAN BE DONE THROUGH TRADITIONAL GRANT AGREEMENTS, INCLUDING INSTALLMENT FUNDING BASED UPON BENCHMARKS TO GOAL Schedule I (Form 990) 2018

Additional Data

NEW VIRGINIA MAJORITY

3801 MT VERNON AVENUE ALEXANDRIA, VA 22305

1625 MASSACHUSETTS

WASHINGTON, DC 20036

AVENUE NW SUITE

EDUCATION

STATE VOICES

Software ID: **Software Version: EIN:** 26-4802468 Name: VOTER REGISTRATION PROJECT

27-1705920

20-1115618

Form 990 Schedule T Part II	. Grants and Other Assistance to	n Domestic Organizat	tions and Domest	ic Governments
roini 990,9chedale 1, Fait 11,	y Grants and Other Assistance to	o Donnestie Organiza	cions and bonicse	ic dovernincing.

organization	ıf applıcable	grant	cash	(book, FMV, appraisal,
or government			assistance	other)

organization	 ıf applicable	grant	cash	(book, FMV, apprais
or government		J	assistance	other)
_				

501(C)(3)

501(C)(3)

(d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Name and address of (b) EIN (c) IRC section

568,912

2,978,432

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

VOTER REGISTRATION

VOTER REGISTRATION

ARIZONA, COLORADO,

FLORIDA, GEORGIA, NEVADA, NORTH

VIRGINIA

CAROLINA

IFMV

FM∨

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 37-1782220 501(C)(3) 1,417,230 **IFMV** ONE ARIZONA VOTER REGISTRATION 530 E MCDOWELL ROAD SUITE ARIZONA 107 PHEONIX. AZ 85004 MI FAMILIA VOTA EDUCATION 20-0182824 501(C)(3) 4.487.442 IFMV VOTER REGISTRATION

FOUNDATION COLORADO, FLORIDA, 1710 E INDIAN SCHOOL ROAD NEVADA SUITE 100

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

100

PHEONIX, AZ 85016

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance PROGEORGIA STATE TABLE 46-1064042 501(C)(3) 239.611 IFMV VOTER REGISTRATION GEORGIA INC

1530 DEKALB AVENUE NE SUITE A ATLANTA, GA 30307					
NEW FLORIDA MAJORITY	45-3956785	501(C)(3)	641,699	FMV	VOTER RE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MIAMI, FL 33161

REGISTRATION 10800 BISCAYNE BLVD SUITE FLORIDA 1050

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-2459538 501(C)(3) 198.025 **IFMV** BLUEPRINT NC VOTER REGISTRATION 3739 NATIONAL DRIVE SUITE INORTH CAROLINA

201 RALEIGH, NC 27612

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RALEIGH, NC 27605

NORTH CAROLINA A PHILIP 56-1500282 501(C)(3) 938.555 **IFMV** VOTER REGISTRATION RANDOLPH INSTITUTE NORTH CAROLINA 1408 HTLLSBOROUGH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 82-1348307 501(C)(3) 1.099.995 **IFMV** NEW GEORGIA PROJECT VOTER REGISTRATION 165 COURTLAND STREET GEORGIA

NORTH CAROLINA

SUITE A-231 ATLANTA. GA 30303 ACTION INSTITUTE NORTH 56-1088116 501(C)(3) 185.624 **IFMV** VOTER REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CAROLINA

1817 CENTRAL AVE SUITE 211 CHARLOTTE, NC 28205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-4384675 501(C)(3) 736.476 IFMV ORGANIZE FLORIDA VOTER REGISTRATION EDUCATION FUND FLORIDA

IVOTER REGISTRATION

NORTH CAROLINA

EDUCATION FUND

134 E COLONIAL DRIVE

ORLANDO, FL 32801

THE PEOPLE'S ALLIANCE FUND 58-1429955 501(C)(3) 169,007 FMV VOTER RE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1011 MINERVA AVENUE

DURHAM, NC 27701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 03-0437078 501(C)(3) 264.685 **IFMV** UNIFOUR ONE VOTER REGISTRATION INORTH CAROLINA

1400 BATTLEGROUND AVENUE 144F GREENSBORO, NC 27408 13-3573852

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10005

HISPANIC FEDERATION 501(C)(3) 508.005 **IFMV** VOTER REGISTRATION 55 EXCHANGE PLACE 5TH FLORIDA FLOOR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 20-0984437 501(C)(3) 163.187 **IFMV** GEORGIA STAND UP VOTER REGISTRATION 501 PULLIAM ST SW SUITE GEORGIA 100

COLORADO

501 PULLIAM ST SW SUITE
100
ATLANTA, GA 30312

NEW ERA COLORADO 26-1389272 501(C)(3) 350,033 FMV VOTER REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FUNDATION

PO BOX 181153 DENVER, CO 80218

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 9 TO 5 GEORGIA 34-1246311 501(C)(3) 187,011 IFMV VOTER REGISTRATION

501 PULLIAM ST SW SUITE 344 ATLANTA, GA 30312					GEORGIA
GEORGIA COALITION FOR THE PEOPLE'S AGENDA 100 EDGEWOOD AVENUE NE	58-2484833	501(C)(3)	215,611	FMV	VOTER REGISTRATION GEORGIA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 1008 ATLANTA, GA 30303

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 02-0758897 501(C)(3) 96.470 IFMV COLORADO CIVIC VOTER REGISTRATION ENGAGEMENT ICOLORADO

PO BOX 1620 DENVER, CO 80201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MIAMI, FL 33138

ENGAGE MIAMI CIVIC FUND 46-2465621 501(C)(3) 200.000 IFMV IVOTER REGISTRATION 8325 NE 2ND AVE SUITE 205 FLORIDA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 47-2438087 501(C)(3) 247.714 **IFMV** ASIAN COMMUNITY VOTER REGISTRATION DEVELOPMENT FUND NEVADA 2610 S JONES BLVD 3 LAS VEGAS, NV 89146

IFMV

VOTER REGISTRATION

ARIZONA

423.098

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

ARIZONA CENTER FOR

3120 N 19TH AVE SUITE 190 PHOENIX, AZ 85015

EMPOWERMENT

27-2366780

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-1689914 501(C)(3) 709.885 IFMV CENTRAL ARIZONANS FOR A VOTER REGISTRATION CHCTAINABLE ECONOMY ADIZONA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ATLANTA, GA 30307

2401 N CENTRAL AVENUE SUITE 120 PHEONIX, AZ 85004					ARIZONA
EQUALITY FOUNDATION OF	58-2346744	501(C)(3)	82,532	FMV	VOTER REGISTRATION

GEORGIA INC GEORGIA 1530 DEKALB AVENUE SUITE A

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FAIR SHARE EDUCATION FUND 26-2533551 501(C)(3) 2.754.000 IFMV VOTER REGISTRATION

3435 WILSHIRE BOULEVARD SUITE 385 LOS ANGELES, CA 90010					ARIZONA, COLORADO, FLORIDA, GEORGIA, NORTH CAROLINA
FLORIDA IMMIGRANT COALITION INC 2800 BISCAYNE BLVD SUITE	20-2123833	501(C)(3)	323,074	FMV	VOTER REGISTRATION FLORIDA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ROLINA GISTRATION 800 MIAMI, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-1379661 501(C)(3) 3,437,850 **IFMV** LEAGUE OF CONSERVATION VOTER REGISTRATION VOTERS EDUCATION FUND ARIZONA, COLORADO, 740 15TH STREET FLORIDA, NEVADA, NORTHWEST SUITE 700 NORTH CAROLINA. WASHINGTON, DC 20005 VIRGINIA

740 15TH STREET
NORTHWEST SUITE 700
WASHINGTON, DC 20005

NAACP GEORGIA STATE
CONFERENCE
2001 M L KING JR DRIVE

FLORIDA, NEVADA,
NORTH CAROLINA,
VIRGINIA

VOTER REGISTRATION
GEORGIA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 307

ATLANTA, GA 30310

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 81-3125435 501(C)(3) 63.449 **IFMV** NORTH CAROLINA ASIAN VOTER REGISTRATION INORTH CAROLINA

NORTH CAROLINA

AMERICANS TOGETHER 5209 DIXON DRIVE RALEIGH, NC 27609 56-6061662 501(C)(3) 113.876 **IFMV** VOTER REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NORTH CAROLINA NAACP STATE CONFERENCE

1001 WADE AVENUE SUITE 15 RALEIGH, NC 27605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 26-1601472 501(C)(3) 1,903,903 **IFMV** OHIO ORGANIZING VOTER REGISTRATION COLLABORATIVE OHO 25 EAST BOARDMAN STREET SUITE 230 YOUNGSTOWN, OH 44503

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2049 NORTH PEARL STREET JACKSONVILLE, FL 32206

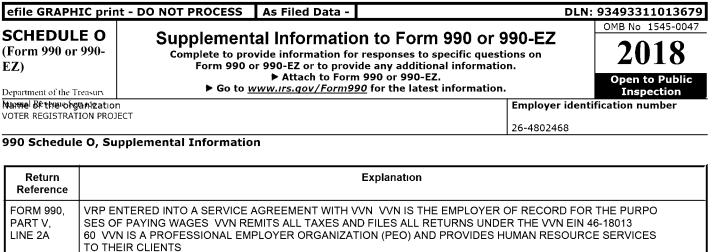
(a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance UNIDOSUS 86-0212873 501(C)(3) 1.228.464 IFMV VOTER REGISTRATION

UNIDOSUS 86-0212873 501(C)(3) 1,228,464 FMV VOTER REGIST FLORIDA

NORTHWEST SUITE 600

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20036



Return Explanation
Reference

FORM 990, VOTER REGISTRATION PROJECT COMPLIES WITH APPLICABLE RULES REQUIRING THAT IT MAKE ITS FEDER PART V, AL FORM 990 AND RELATED SCHEDULES AVAILABLE TO THE PUBLIC FOR INSPECTION VOTER REGISTRATION PROJECT DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Return Explanation
Reference

FORM 990, A DRAFT COPY OF THE 990 IS PROVIDED TO THE BOARD OF DIRECTORS UPON APPROVAL, THE FINAL CO PART VI, PY OF THE 990 IS SIGNED BY THE CAMPAIGN DIRECTOR AND FILED WITH THE IRS

SECTION B, LINE 11B

Return Explanation
Reference

FORM 990,	THE CONFLICT OF INTEREST POLICY SHALL BE DISTRIBUTED ANNUALLY TO ALL DIRECTORS, OFFICERS,
PART VI,	MEMBERS OF BOARD COMMITTEES, AND STAFF DIRECTORS, OFFICERS, AND SENIOR STAFF SHALL SIGN A
SECTION B,	N ANNUAL ACKNOWLEDGEMENT THAT THEY HAVE RECEIVED A COPY OF THIS POLICY, UNDERSTAND IT, AND
LINE 12C	AGREE TO ARIDE BY ITS TERMS

Return

Reference	·
FORM 990,	VOTER REGISTRATION PROJECT'S BOARD OF DIRECTORS RECEIVES NO COMPENSATION FOR THEIR SERVICE
PART VI,	S THE BOARD OF DIRECTORS SETS THE CAMPAIGN DIRECTOR'S SALARY TO ACCOMPLISH THIS, THE BOA
SECTION B	RD OF DIRECTORS APPOINTED A TEMPORARY TASK FORCE OF THREE BOARD MEMBERS TO STUDY THE ISSUE

Explanation

SECTION B,
LINE 15A

RD OF DIRECTORS APPOINTED A TEMPORARY TASK FORCE OF THREE BOARD MEMBERS TO STUDY THE ISSUE
AND MAKE A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS. THE TASK FORCE REPORTED THAT IT
EXAMINED SALARIES AT COMPARABLE ORGANIZATIONS, ASSESSED THE ORGANIZATIONS FINANCIAL RESOU
RCES AND COMPENSATION CULTURE, AND BROUGHT A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS
THE FULL BOARD OF DIRECTORS MET IN AN EXECUTIVE SESSION, DISCUSSED THE TASK FORCE'S RECO
MMENDATION, AND VOTED ON A SPECIFIC SALARY CONTEMPORANEOUS MINUTES WERE RECORDED

Return Explanation
Reference

FORM 990,	VOTER REGISTRATION PROJECT COMPLIES WITH APPLICABLE RULES REQUIRING THAT IT MAKES ITS FEDE
PART VI,	RAL FORM 990 AND RELATED SCHEDULES AVAILABLE TO THE PUBLIC FOR INSPECTION VOTER REGISTRTA
SECTION C,	ON PROJECT DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANC
LINE 19	I IAL STATEMENTS AVAILABLE TO THE PUBLIC

Return Explanation
Reference

FORM 990,	THE ORGANIZATION'S PROCESS HAS NOT CHANGED FROM LAST YEAR THE MANAGEMENT TEAM REVIEWS THE
PART XII,	PROPOSALS RECEIVED FROM THE INDEPENDENT ACCOUNTANTS THE MANAGEMENT TEAM MAKES AN INTERNA
LINE 2C	L RECOMMENDATION ON THE SELECTION OF INDEPENDENT ACCOUNTANT AND AUDITORS, WHICH IS THEN RE
	VIEWED AND APPROVED BY THE BOARD OF DIRECTORS THE MANAGEMENT TEAM ALSO REVIEWS THE ENGAGE
	MENT AGREEMENTS FROM THE ACCOUNTING AND AUDIT FIRMS ANNUALLY